

Global Status Report on Alcohol and Health: Implications for Uganda

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Ethanol; a psychoactive substance

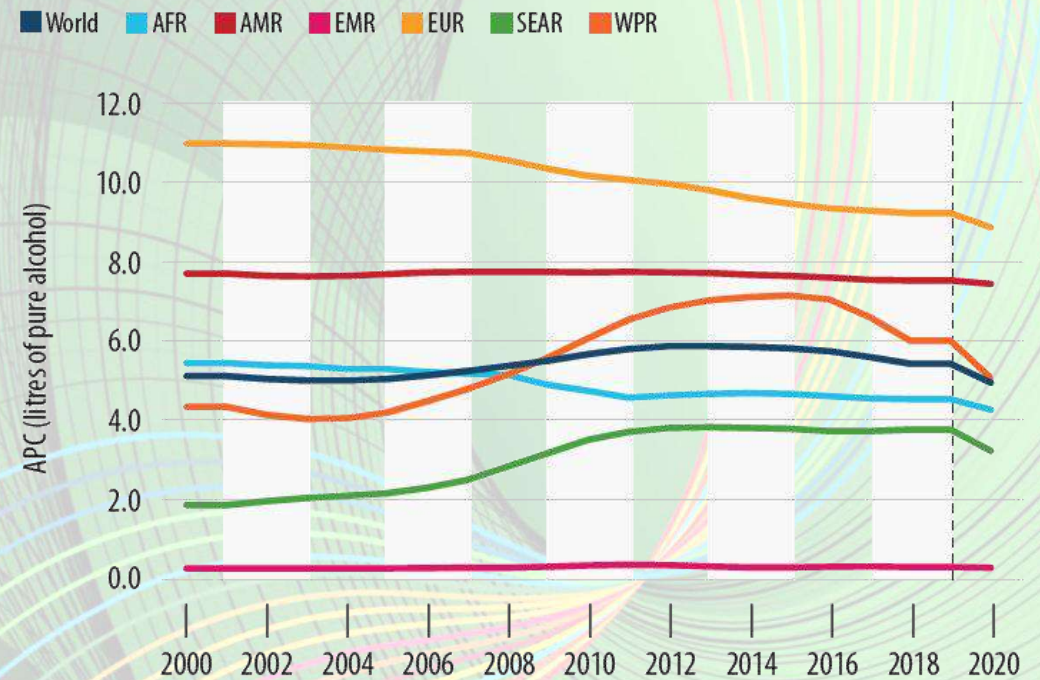
Alcohol consumption can harm the drinker and indirectly others by its:

- toxic effects and adverse drug reactions on organs and tissues;
- Intoxication/acute pharmacodynamics, leading to impairment of physical coordination, consciousness, cognition, perception, affect or behaviour;
- Addiction pharmacology and the dependence producing propensities, whereby the drinker's self-control over his or her drinking behaviour is impaired.

Alcohol, consumption, society and public health

In 2019, alcohol caused

- 2.6 million deaths (4.7% of all deaths)
- 116 million DALYs lost (4.6% of all DALYs lost)
- 400 million adults (7.0% of all adults) have an AUD
- Considerable gender and geographical differences
- Over 50% of alcohol-attributable deaths occur before 60 years of age
- Most adults (56%) did not drink alcohol last 12 months
- Considerable negative health and social consequences for others than the drinker



FILTERS

Alcohol, total per capita (15+) consumption (in litres of pure alcohol) (SDG Indicator 3.5.2), three-year average

Year

2019

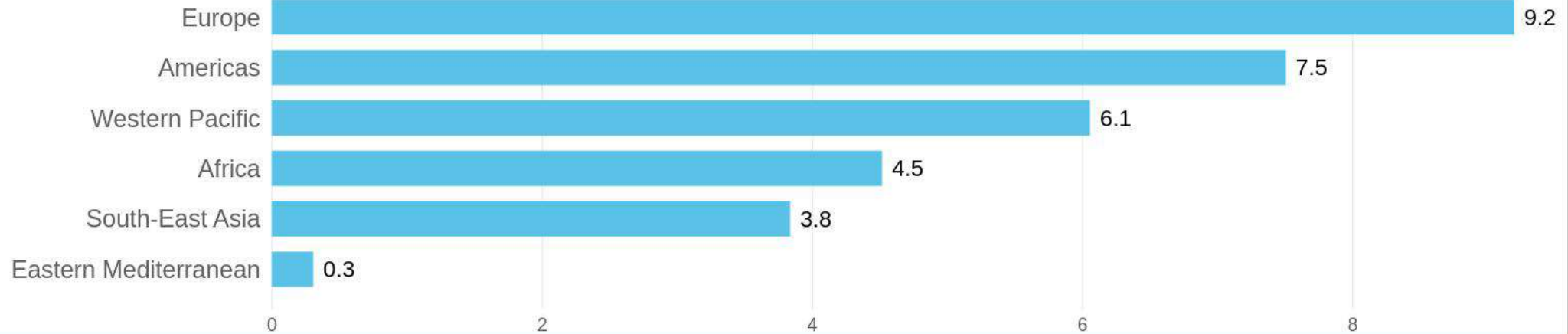
Disaggregation

Sex

Global value

5.5

Regional values

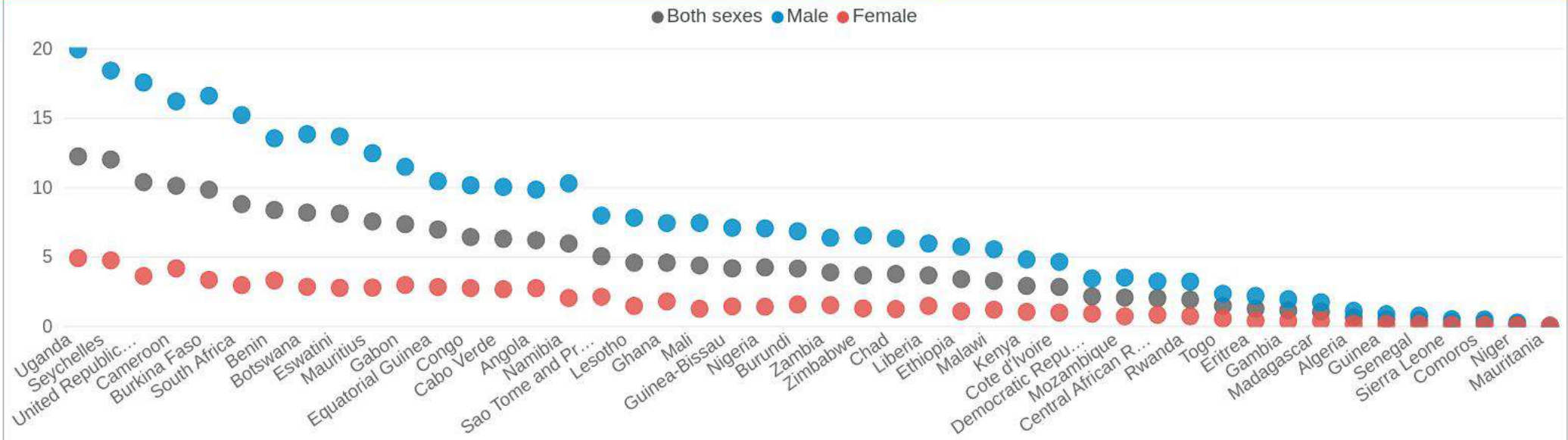


Select region

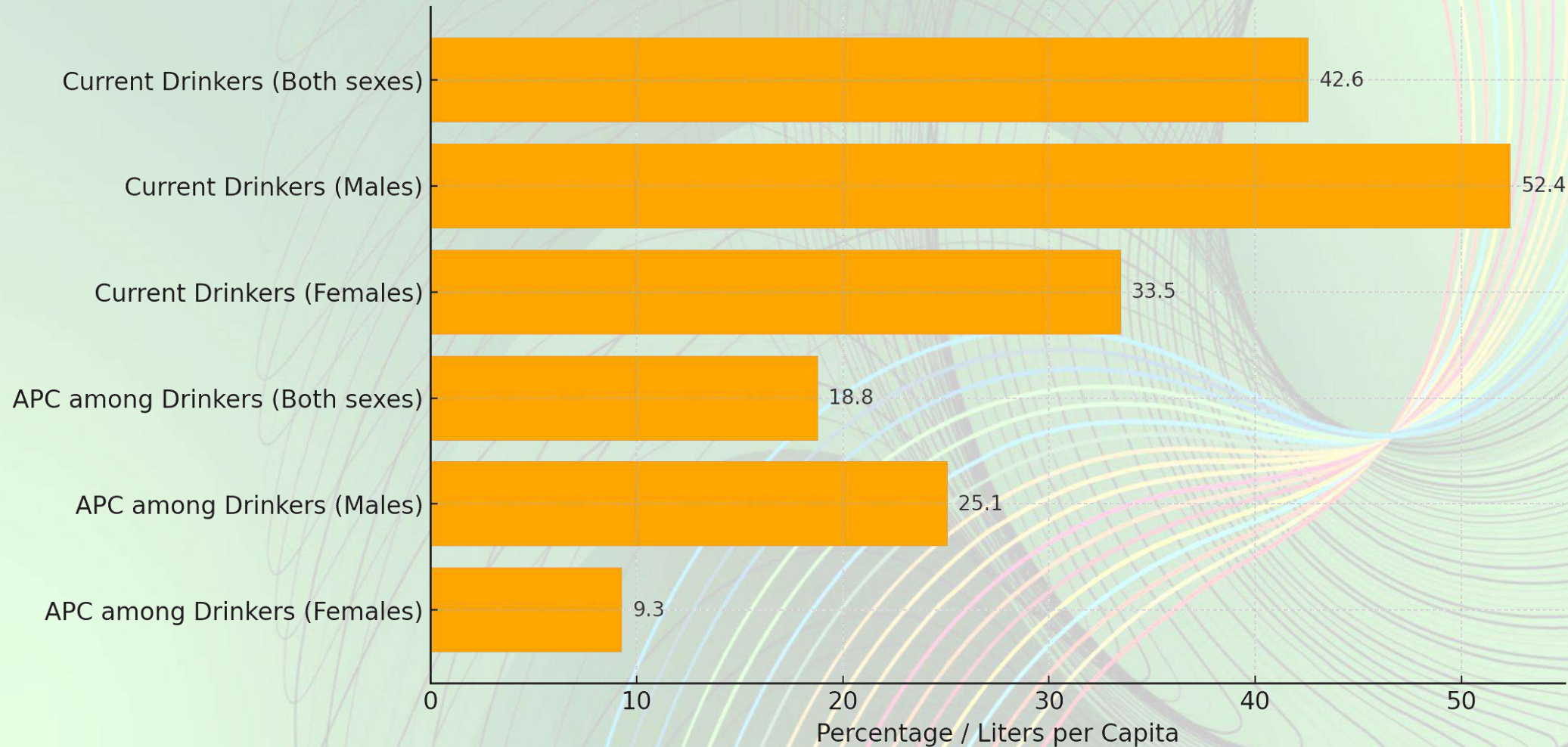
Africa

- Americas
- Eastern Mediterranean
- Europe
- South-East Asia
- Western Pacific

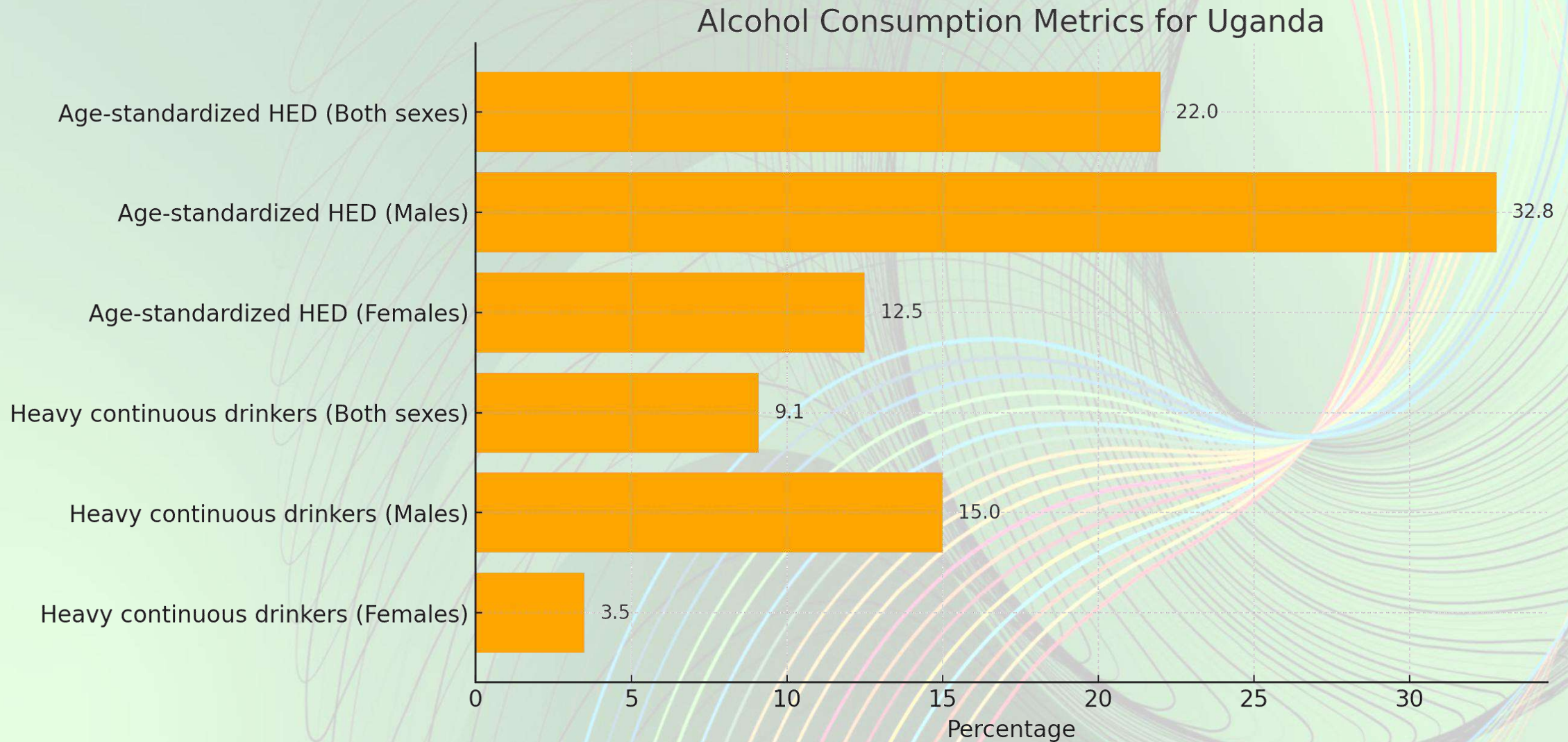
Distribution by country



Current drinkers and APC among drinkers in Uganda



Heavy episodic and heavy continuous drinking in Uganda



Health conditions associated with deaths and disability and causally related to alcohol consumption

Diseases and injuries included in the analysis

Detrimental

Communicable, maternal, perinatal and nutritional conditions

Tuberculosis, HIV/AIDS, sexually transmitted diseases, lower respiratory infections

Noncommunicable diseases

Lip and oral cavity, pharyngeal cancers (excluding nasopharyngeal), oesophageal cancer, colon and rectal cancers, liver cancer, breast cancer, cervical cancer, laryngeal cancer, alcohol use disorders, epilepsy, hypertensive heart disease, haemorrhagic stroke, alcoholic cardiomyopathy, cirrhosis of the liver, pancreatitis

Injuries

Unintentional injuries

Road traffic injuries, poisonings, falls, fire, heat and hot substances, drowning, exposure to mechanical forces, other unintentional injuries

Intentional injuries

Suicides, homicides

Beneficial (at low levels of alcohol consumption)*

Noncommunicable diseases

Diabetes mellitus (women only), ischaemic heart disease, ischaemic stroke

* No health benefits are observed for people who engage in heavy episodic drinking.

Not included in the analysis, but where alcohol has been shown to be causally related: e.g. major depressive disorders, atrial fibrillation and flutter, oesophageal varices, psoriasis.

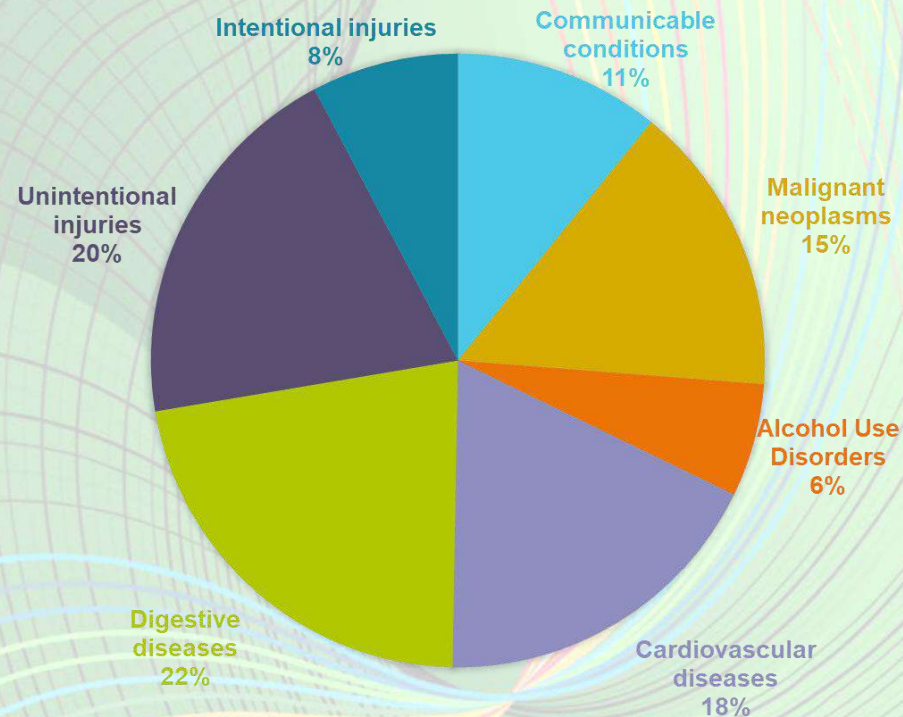
Alcohol-attributable fractions (AAFs) for selected causes of death

Percentage of alcohol-attributable deaths, as a percentage of all alcohol-attributable deaths

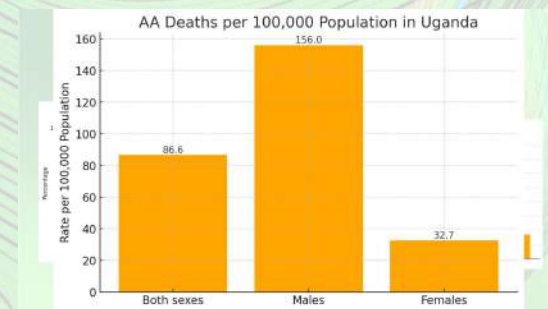
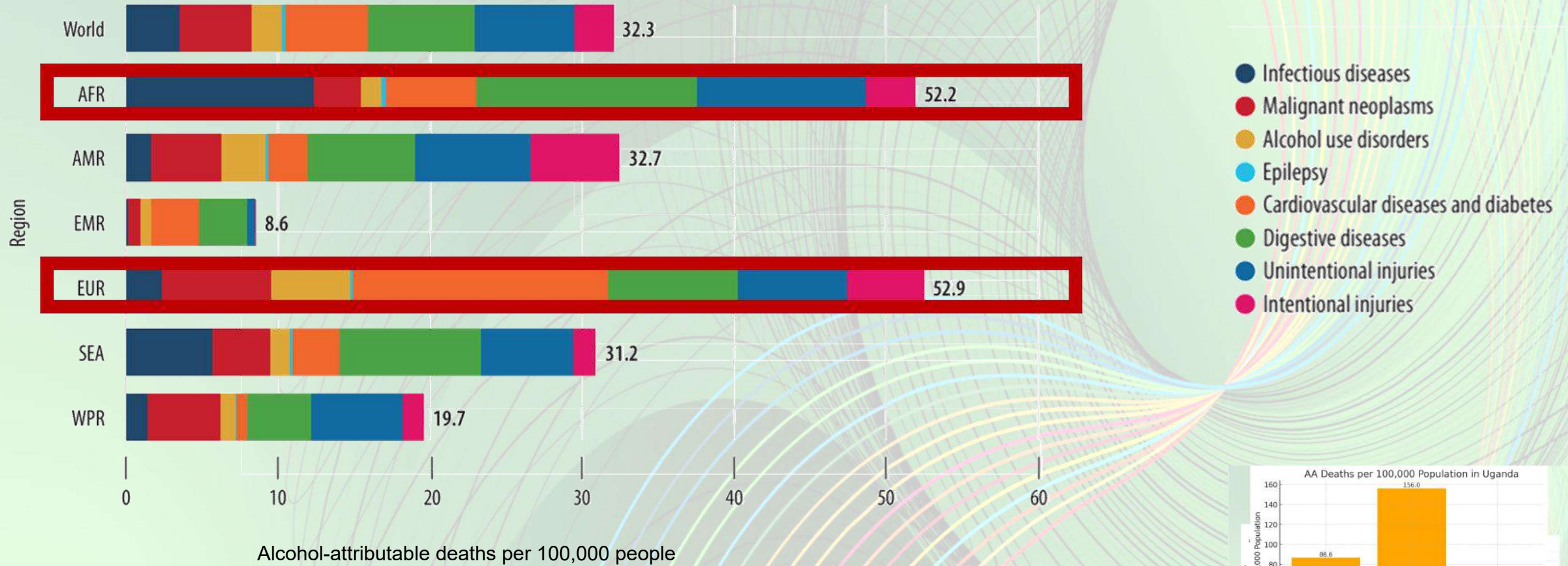
● Attributable ● Not attributable

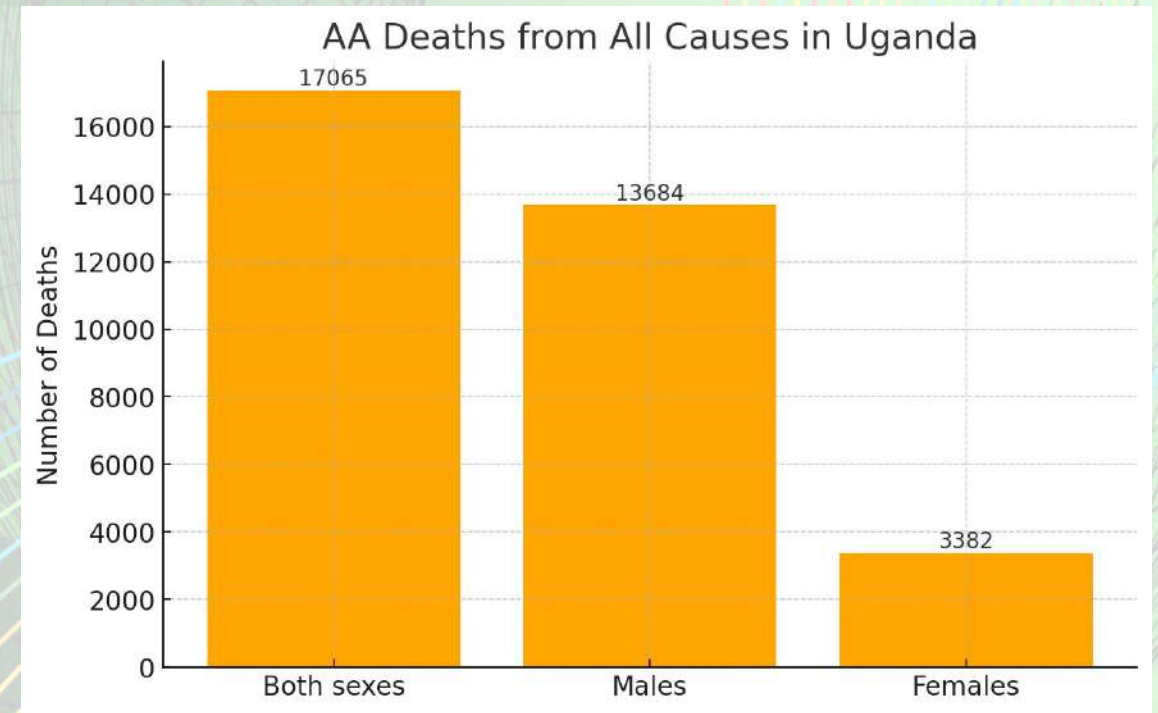
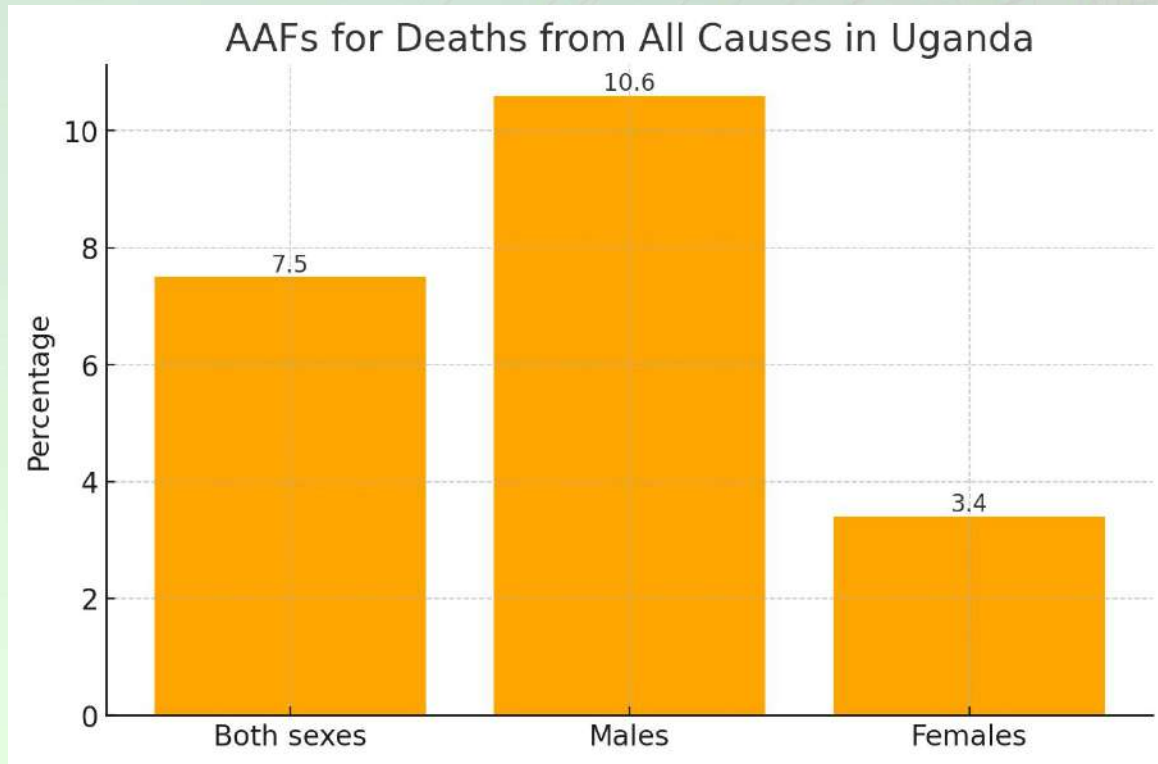
All global deaths

All global DALYs



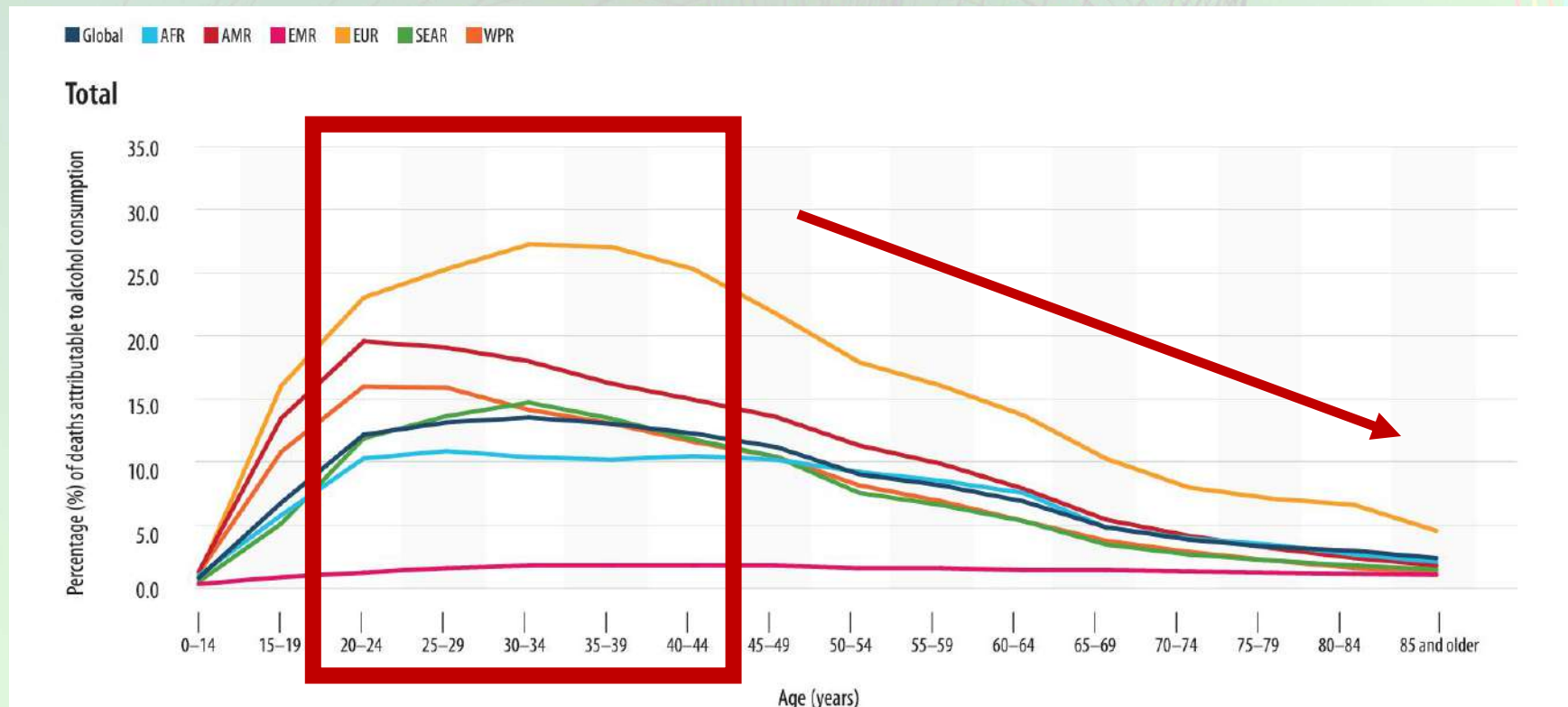
The highest levels of alcohol-attributable deaths per 100 000 persons are observed in the WHO African and European regions.



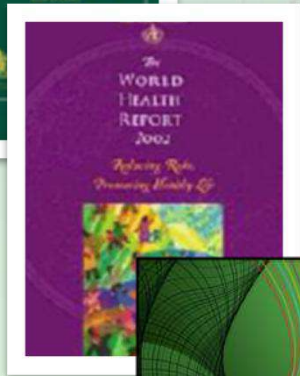
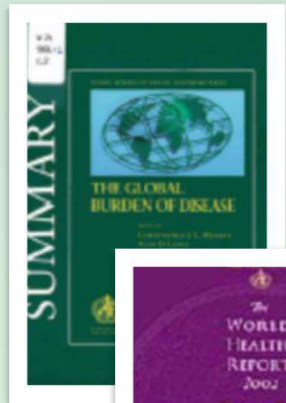


People of younger age are disproportionately affected by alcohol consumption

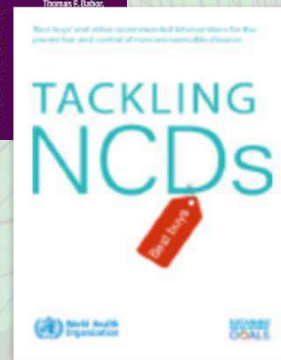
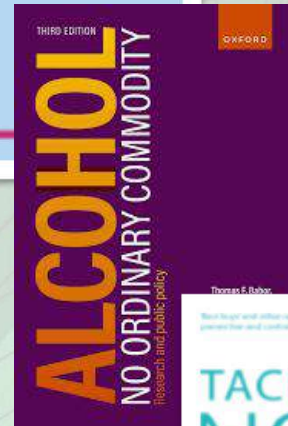
with the highest proportion (13.0%) of alcohol-attributable deaths from all deaths in 2019 among persons of 20–39 years.



THE PROBLEM



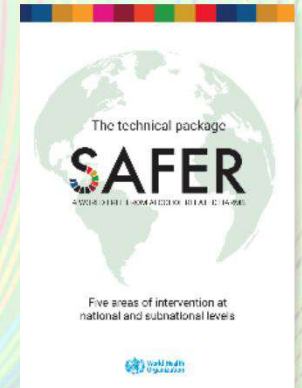
THE SOLUTIONS



THE DECISIONS



THE ACTION

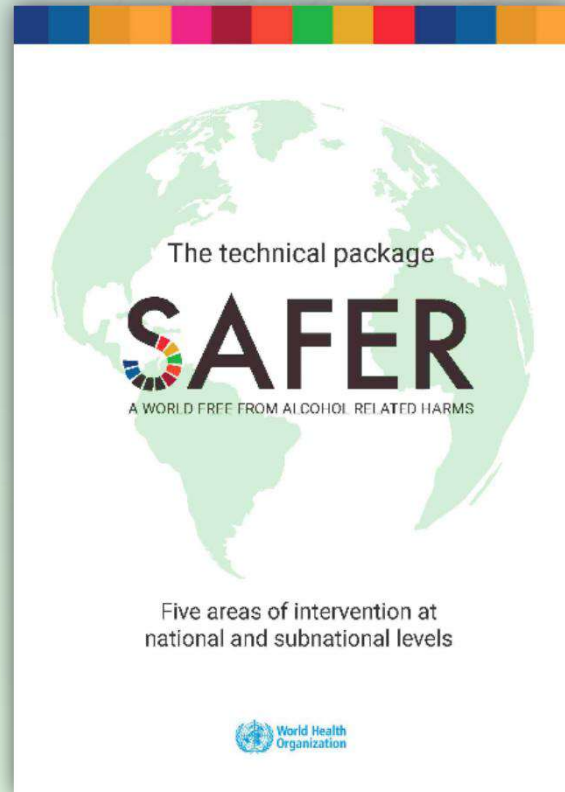


Global SAFER initiative launched in 2018



Partnership to advocate for and
facilitate the implementation of
SAFER high-impact interventions at
country level

High-impact interventions



Strengthen restrictions on alcohol availability



Advance and enforce drink-driving counter measures



Facilitate access to screening, brief interventions and treatment



Enforce bans or comprehensive restrictions On advertising, sponsorship, and promotion



Raise prices on alcohol through excise taxes and pricing policies

JOHNNIE



WALKER

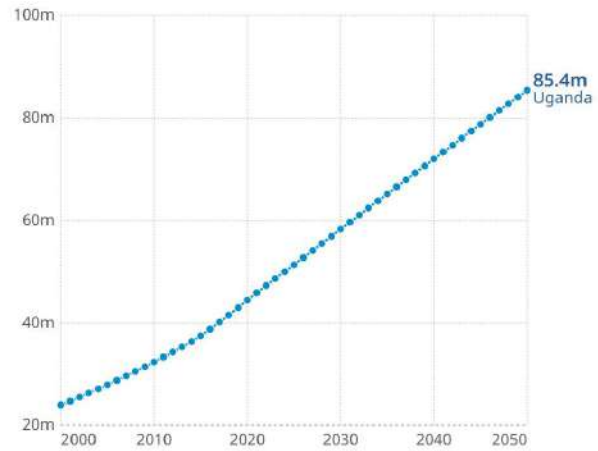


SAFER in Uganda: Since 2021



Population trend

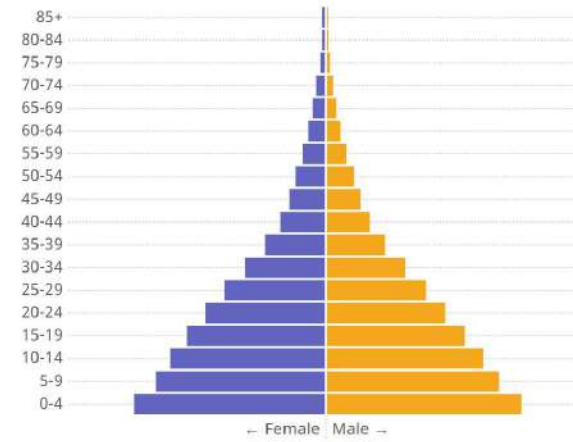
Uganda, 2000 - 2050



Demographic change 2023 - 2050

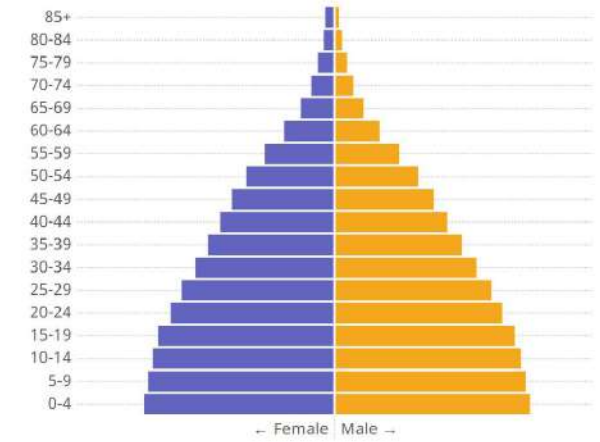
2023

Population by age and sex. Uganda



2050

Population by age and sex. Uganda



Challenges and Lessons learnt

- Complexity of the problem (cultural, contextual)
- Lack of political will and leadership at high level of governments
- Competing economic commitments and policy incoherence
- Influence of commercial interests in policy-making and implementation
- Need for inter-sectoral actions across entities



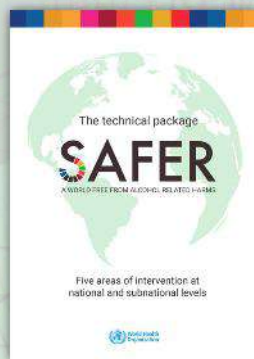
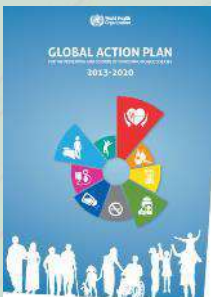
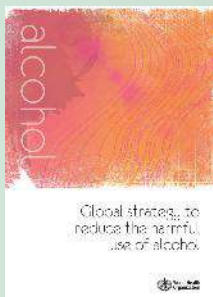
Way forward

- ✓ Local level: Use all opportunities to educate masses and regulate Alcohol (Bylaws and Ordinances)
- ✓ Regional level: Facilitate coordination and harmonization of policies across Districts, cross districts learning and networking
- ✓ Shun alcohol campaigns and elect alcohol champions!



Important resources

- Uganda constitution
- Uganda Alcohol Policy (2018)
- Bylaws and Ordinances: Jinja, Gulu, etc.
- Advocates/ Masses



Thank you for your attention

More information at:

<https://www.who.int/health-topics/alcohol>